Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number 1500 1807

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C.
Submit correct fee
with this Application

3 acres or more required for: ☐ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 7500 s 75th street (no rural route) City Lincoln, NE Zip 68516

Legal Description S22 T9 R7 Clarendon Hills First 1 3
(1/4 1/4 Section Township Range Subdivison Addition Block Lot)

PID 1622103003000

B. Owner

Name Jessica Kelling Signature

Address 7500 s 75th Street City/State/Zip Lincoln NE 68516

Home Phone 402 432 6175 Work Phone

C. Certified Installer

Name: Steven C Lewis Signature

Address 4810 W. Claire Ave. City/State/Zip Lincoln NE 68523

Work Phone 402 432 1082

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres
Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 500

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department
Site visits Date rec'd ACTION ☐ Approved ☐ Disapproved
Date frwd Signature
Comments

2. Supt. Bldg. Insp. or Village Clerk
Comments Date rec'd ACTION ☐ Approved ☐ Disapproved
Date frwd Signature

3. City or County Engineer
Comments Date rec'd ACTION ☐ Approved ☐ Disapproved
Date frwd Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 4-1-19 Amount Paid $420.00
Received By JAD Cash/Check No 8412

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 1/13

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 7500 S 75th Street (no rural route) City Lincoln NE, Zip 68516

Owner Jessica Kelling Address 7500 S 75th Street

Date of Tests 4/10/19 to 4/11/19 Weather: Precipitation .3 in Temperature 42°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop: Last 30 mins of 4 hr or last 10 mins of 1 hr					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	36	4/10	10:00	4/11	10:00	4/11	10:00	6	4/11	10:30	30	.5	60
2	"	"	"	"	"	"	"	6	"	"	"	.5	60
3	"	"	"	"	"	"	"	6	"	"	"	.5	60
4	"	"	"	"	"	"	"	6	"	"	"	1.5	20
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 432 1082
Address 4810 W. Claire Ave
Lincoln NE 68523

Sum of Percolation Rates: 206
Average of Rates: 50
Rate Used for Calculation: 50-60

Soil type (NRCS Maps/Other) 10+8C Silty Clay to 6 to 11 percent "Sash" 7340.'
Groundwater Depth over 10'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.) _____

Signature of Reviewing Official _____ Date _____

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS001807

System Type: Standard

Situs: 7500 S 75TH ST, LINCOLN, NE 68516

Issued: 4/12/2019

Expires: 4/12/2020

Description: CLARENDON HILLS FIRST ADDITION, BLOCK 1, Lot 3

Owner: YEPES, FERNANDO & KELLING, JESSICA
7500 S 75 ST
LINCOLN, NE 68516

Shavonna M. Lausterer, MPH, CPH, Health Director

Dear Applicant:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Shavonna M. Lausterer, MPH, CPH
Health Director

STEVEN LEWIS
4810 W CLAIRE AVE
LINCOLN, NE 68523

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

SCANNED

A

Permit Number H5001807

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C.
Submit correct fee
with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 7500 S 75th Street (no rural route) City Lincoln NE Zip 68516

Legal Description ____ ____ 22 T9 R7 Clarendon Hills First 1 3
1/4 1/4 Section Township Range Subdivision Addition Block Lot

PID 1622103003000

B. Owner

Name Jessica Kelling Signature ____

Address 7500 S 75th Street City/State/Zip Lincoln NE 68516

Home Phone 402 432 6175 Work Phone ____

C. Certified Installer

Name: Steven C Lewis Signature ____

Address 4810 W. Claire Ave. City/State/Zip Lincoln NE 68523

Work Phone 402 432 1082

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: ____

Designer Name ____ Firm ____ Work Phone ____

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 4.1
Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify ____ Design flow in gallons per day 500

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 02-30

1. Health Department
Site visits 6/14/19 Date rec'd 4/1/19 Date frwd 4/1/19
ACTION ☒ Approved ☐ Disapproved
Signature ____
Comments ____

2. Supt. Bldg. Insp. or Village Clerk
Comments ____ Date rec'd ____ Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

3. City or County Engineer
Comments ____ Date rec'd ____ Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

Installation Final Written Approval
By ____
Date 6/28/19

Business Office Use Only
Date Received 4-1-19 Amount Paid $420.00
Received By ____ Cash/Check No 8412

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated 1/15

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Exhibit 5

Permit Number: H5001807

Onsite Wastewater Treatment System

Inspection Sheet

CS

Date 6/28/19 Legal Description Clarendon Hills Blk 4 Lot 7
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 7500 S 75th City

Owner Address

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Alteration [☐ Tank Only ☐ Trench Only] ☐ Lateral Only

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification):

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 1440 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 320' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe) E2 flow

No. of Absorption Laterals 3 Width 4.5 factor No. of Drop Boxes Distribution Box 1

Leveling Method Used Laser

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Distance From	Private Well	Public Well	Surface Water	Ground water	Pressure Water Lines	Property Lines
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☒	10 ☐	5 ☒
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	5 ☐

Geographical Coordinates to 6 Decimals:

Tank

Lateral #1 N/A Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial DC Date 6/14/19

Follow-Up Date

Follow-Up Date

Installation Final Written Approval
By Doug Thrasher

Date 6/28/19

Field Note Drawing (See Reverse Side):

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Received Time Jun. 27. 2019 1:45PM No. 0954

Permit Number:

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon (Skip to Back Page) ☒ Subsurface Septic ☐ Mound

Onsite Wastewater System Location

Address or Legal Description or Parcel Identification Number (PID) 1622103003000

Owner: Fernando Yepes Address 7500 S. 75th street Lincoln 68516

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 80 ft.

B. Septic Tank

1. Material Plastic
2. Capacity: 1500
3. Depth to top of tank, below unfinished grade: 30 in.
4. Distance to:
   Well 150 ft.
   Pressure line NA ft
   Property Line 100 ft.
   Foundation 44 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 19 ft. NE

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: Polystyrene Bimotus (4.5)
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 140 ft. 100 ft. 80 ft.
4. Drainfield size: 1440 sq. ft.
5. Distance to:
   Well 125 ft.
   Pressure line NA ft.
   Property line 85 ft.
   Depth of Groundwater over 12

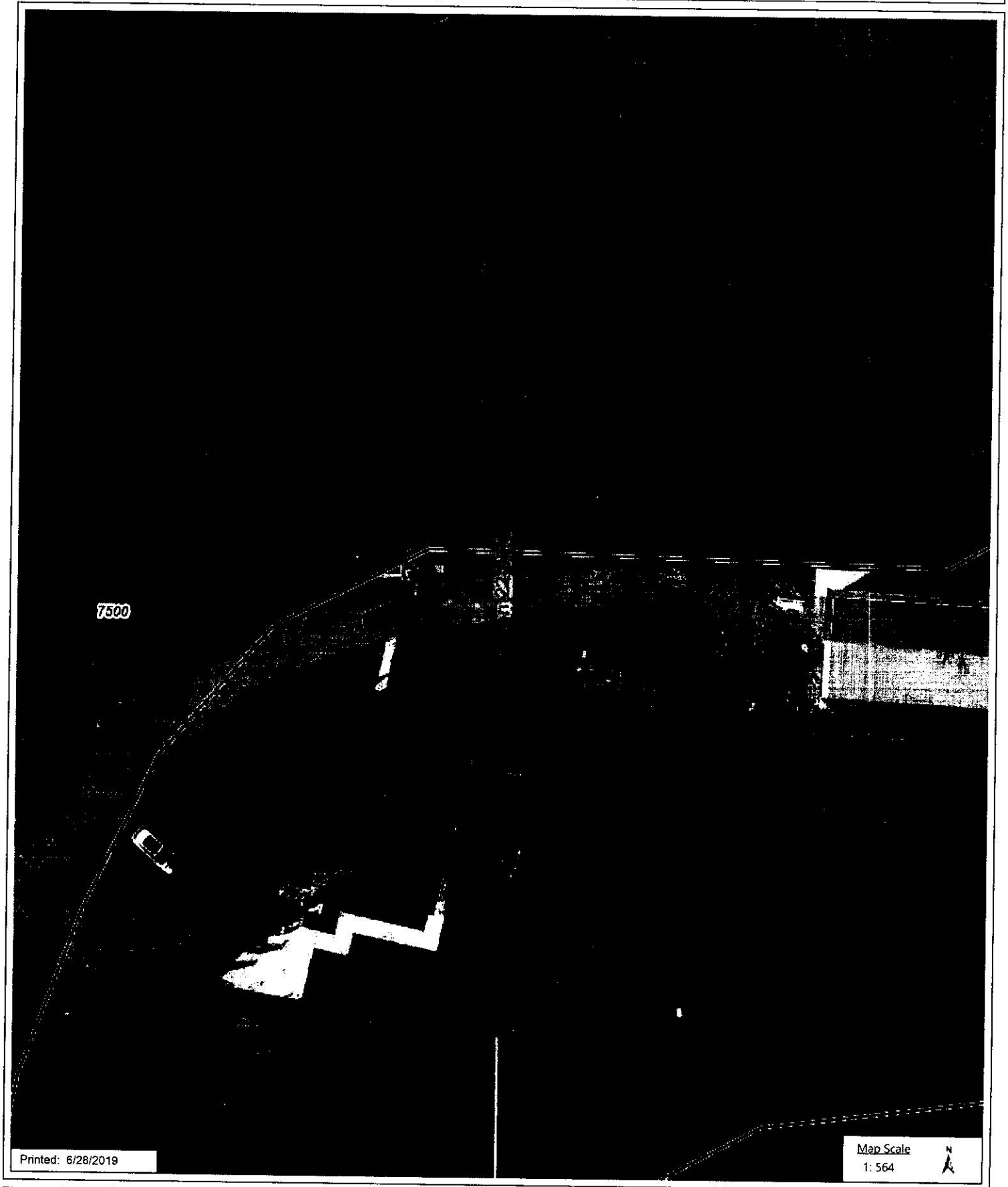
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No

If Yes, the Certified Professional must sign below for final approval:

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date: 14 June 2019

Complete As-Built drawing on the back of this form.



DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

Received Time Jun. 27. 2019 1:45PM No. 0954

GIS Viewer

CITY OF LINCOLN / LANCASTER COUNTY, NE

I want to...

Tools

7300

City of Lincoln\Lancaster County, NE GIS | Lan

erials

0 20 40ft